**Annual Inspection Checklist for PC2 Laboratories**

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| **Facility name:** |
| **Inspected by:** | **Date:** |
|  | **OGTR Identifier number:** |

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| **Facility and fitting conditions** |
|  | **Yes** | **No** | **N/A** | **Notes** |
| **Facility** | Fully enclosed space bounded by walls, doors, windows, floors and ceilings  |  |  |  |  |
| Any significant structural changes that may affect containment |  |  |  |  |
| **Surfaces** | Smooth, impermeable to water, cleanable and resistant to damage by cleaning agents used in the facility (includes furnishings, benches, walls, floors etc.) |  |  |  |  |
| **Decontamination of hands** | Hands free washbasin fitted**OR** |  |  |  |  |
| Other means of decontamination of hands (eg: dispensers containing decontaminant solution) |  |  |  |  |
| **Open spaces under benches and equipment** | Accessible for decontamination |  |  |  |  |

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|  | **Yes** | **No** | **N/A** | **Notes** |
| **Eyewash** | Equipment provided and maintained |  |  |  |  |
| **Aerosol containment** | Dealings involving Risk Group 2 PC2 GMOs produce aerosols |  |  |  |  |
| BSC or other equipment specifically approved in writing present |  |  |  |  |
| **If BSC Class I or II used to contain the aerosols:** |
| BSC inspected and tested at least once within last 12 months |  |  |  |  |
| Certificate of test results and date of next test affixed to side of cabinet |  |  |  |  |
| **Heat based decontamination equipment** | Validated monthly |  |  |  |  |
| Calibrated annually |  |  |  |  |
| **Waste** | Autoclave bags loaded correctly, i.e. not overloaded |  |  |  |  |
|  | Waste labelled with name, date and facility of origin |  |  |  |  |
| **Backflow prevention** | **If installed** – maintained and tested annually (if testable) |  |  |  |  |
| Changes to or new connections made to the water supply(**If yes** - new Risk Assessment required) |  |  |  |  |
| If RA requires backflow protection, is it installed and functioning properly due to new risks |  |  |  |  |

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| **General conditions** |
|  | **Yes** | **No** | **N/A** | **Notes** |
| **Ownership of facility** | Certification holder owns or has authority to maintain facility and fittings |  |  |  |  |
| **If no** – has owner failed to carry out or refused to carry out required maintenance |  |  |  |  |
| **Signs** | OGTR signage and biohazard signs affixed to access door/s (signs are on or near access door/s and able to be clearly seen by persons entering facility)  |  |  |  |  |
| **Disinfectant** | Supply suitable for use against the GMOs dealt with in the facility available. (Concentration of disinfectant and date of preparation appropriate for effectiveness? Container appropriately labelled?) |  |  |  |  |
| **Pests** | Pest control strategy in place |  |  |  |  |
| **Obligations of the certification holder in respect to the users of the facility** |
|  |  | **Yes** | **No** | **N/A** | **Notes** |
| **Authorised persons** | Facility access restricted to authorised persons (as described in Part B, conditions 1 to 9, of the *Guidelines for Certification of Physical Containment Facilities PC2 Laboratory Version 3.2 – issued 1 March 2013*) |  |  |  |  |
| **Behavioural Requirements**  |
| **Training** | Persons conducting dealings with GMOs in the facility have been trained in the behavioural requirements (as listed in Part C of *Guidelines for Certification of Physical Containment Facilities PC2 Laboratory Version 3.2 – issued 1 March 2013)* |  |  |  |  |
| **Facility Manual** | Copies in the facility manual of all approved applications for NLRDs and/or licence conditions for any DNIRs or DIRs conducted in the laboratory. |  |  |  |  |
|  | Record of notification of licence conditions to personnel working on any DNIRs or DIRs conducted in the laboratory is up to date. |  |  |  |  |
| **Personal protection** | Personnel working in the facility wear labcoats and closed footwear, and have long hair tied back |  |  |  |  |
| **Food & drink** | Any food, drinks or associated utensils, e.g. coffee mugs, present in laboratory? |  |  |  |  |